



Plastic surgery is one thing, but having the eye of an artist is quite another, and Dr Katarzyna Mackenzie has precisely this combination of skills as an active appreciator of fine arts, and a painter in her own right. The finesse and fine motor skills required for the delicate plastic surgery she performs, as well as her vision, and understanding of the future appearance of a healed surgery sets her apart as a plastic surgeon.

Dr Mackenzie is one of just a handful of female plastic surgeons in the country, and one of only four plastic surgeons ever awarded a PhD in New Zealand. She runs Visage Plastic Surgery, a private surgical practice in Auckland. Her clients access a wide range of surgical procedures, but some aesthetic plastic surgery is particularly sought after. Dr Mackenzie has developed a well-respected reputation for distinctively fine breast augmentation, reduction, and lift, as well as abdominoplasty, upper eyelid surgery, and labiaplasty. She also enjoys, and specialises in very fine hand-surgery, and frequently also performs skin-cancer surgery and reconstruction.

Her approachability and warmth are encouraging. Eye was particularly interested in learning about the aesthetic breast surgery she performs.

MASTOPEXY (BREAST UPLIFT)

Dr Mackenzie says, "Mastopexy makes the breast more shapely, firmer, and better supported, as well as bringing the nipple back to the position it was at in more youthful days without changing the breast size. That lends itself to more physical confidence in the patient. Mastopexy restores feminine proportions, and bras and swimsuits fit more comfortably and attractively.

"Women who benefit most from mastopexy are those with drooping breasts caused by weight loss, pregnancy, or ageing, and also those whose breasts are asymmetrical."

It is common for women to make the decision to undergo mastopexy as a single procedure, but sometimes this surgery is performed in combination with breast augmentation.

Surgery is carried out under general anaesthetic and the patient is normally able to return to work in 2-3 weeks. You'll need a sports bra day and night for six weeks, and to sleep on your back for the first few weeks following surgery. Swelling and bruising normally disappears between four and six weeks.

The final aesthetic result will not be fully seen for three to six months, so you'll need a little patience and trust in the process.

Any kind of surgery includes inherent risk and Dr Mackenzie is frank about the possible risks of breast surgery.

If you write down the potential complications associated with breast surgery, the list looks scary, but Dr Mackenzie goes through them in detail with you. She says, "The bottom line is that every choice in breast surgery presents trade-offs."

"Patients should follow their surgeon's advice to reduce risk; for example, no smoking (I don't operate on smokers), and wearing a supportive bra to minimise breast implant movement."

Smokers have high levels of carbon monoxide in their blood which inhibit healing and minimise the chances for aesthetic success. Even plastic surgeons who are willing to perform cosmetic surgery on smokers strongly advise that smoking stops for a minimum of a month before and after surgery to enable optimum healing of the very delicate skin and tissue of the breast.

Questions for your surgeon when considering Mastopexy

- ✓ Is your surgeon a specialist plastic surgeon and NOT a cosmetic surgeon? Most surgeons who call themselves cosmetic surgeons are NOT specialist plastic surgeons.
- ✓ Does the surgeon operate in an accredited facility? All specialist plastic surgeons do!
- ✓ What is the expected recovery time?
- ✓ Ask to see before and after photos so you can determine if you like the aesthetic outcomes a particular surgeon offers.
- ✓ What complications are possible and how are they dealt with if they occur?
- ✓ What are the usual effects of ageing, weight changes, or pregnancy on mastopexy?
- ✓ How do I need to prepare for surgery?
- ✓ What can I expect during the recovery phase?
- ✓ Where will the scars be?
- ✓ Is aftercare provided?
- ✓ What's the cost?

MAKING A BREAST OF IT

Visage Plastic Surgery

BREAST REDUCTION

Having large breasts such as a DD can make buying clothes difficult, cause a woman to be very self-conscious, and can cause back, shoulder and neck pain. The change for patients after breast reduction can be remarkable though. Patients are generally able to sit and stand taller, and their posture is better, and for many, they're now able to exercise which their previously uncomfortable bodies made difficult.

"Smaller, aesthetically shaped, pert breasts are usually the main goal of breast reduction surgery," says Dr Mackenzie, "but it is important that long term, the surgery also improves the patient's physiological and physical wellbeing. There's no question that breast reduction is most often a life-changing procedure, and in general is well tolerated."

Most patients undergoing breast reduction, she says, will only be on Paracetamol and Ibuprofen by the fourth day following surgery. Swelling is normal for a few weeks and up to two or three months depending on the size of the breasts. Some patients experience shooting pains as the nerves recover, and sometimes the sensation of pulling - caused by the suspension stitches used to shape the new breast. Dr Mackenzie recommends a minimum of two weeks, and ideally three weeks off work, depending on the type of work her patient does.

Surgery is under general anaesthetic. You should be prepared to wait for two to three weeks before returning to work. For healing you will need to wear a sports bra day and night for a minimum six weeks. You'll also need to sleep on your back, and engage your mighty patience for the final result of surgery which will take up to six months. Unless you fall pregnant or have significant weight gain, or loss, a breast reduction will last for a long time.

Additional questions for your surgeon when considering Breast Reduction

- ✓ Will I be able to breast feed?
- ✓ Will I be able to have mammograms?
- ✓ What are the possible complications, and how will these be addressed if they occur?

BREAST AUGMENTATION EVER IN DEMAND

Dr Mackenzie says breast augmentation is the most common cosmetic surgical procedure worldwide – 15.8% of all cosmetic procedures.

"I am a member of ISAPS," she said, "the International Society of Aesthetic Plastic Surgery (ISAPS), the world's leading professional body for board-certified aesthetic plastic surgeons, and it's the leading global authority on aesthetic and cosmetic surgery. In their latest survey, ISAPS examined the number and types of aesthetic procedures performed around the world in 2020. The data was especially significant because it looked at the impact of COVID-19 on plastic surgeons globally as well as highlighting worldwide trends and regional variations.

"Despite a 3.6% decrease in the number of procedures in 2020, breast augmentation remained the most common. However, the decrease in breast augmentation procedures was notable compared to 2019 for example, especially considering the 20.6% increase over the previous five years. In 2019 surgery to remove breast implants increased by 10.7%. Although New Zealand doesn't have a national database, we tend to follow international trends."

BREAST AUGMENTATION

Women commonly seek breast augmentation when they have naturally small breasts, or when breast shapes or sizes are unequal, or if they have suffered significant volume change in their breasts through weight loss, pregnancy, breast-feeding, or ageing.

"As women age," Dr Mackenzie says, "the production of collagen in our skin reduces, often making our lovely skins slack. If as a younger woman you opted for breast implants, you may find as collagen depletes that your breasts are liable to sag as a combined result of ageing and the added weight of breast implants.

Breast augmentation is performed under general anaesthesia. Dr Mackenzie says it is not a technically demanding procedure in the hands of a specialist plastic surgeon, providing patients are good candidates for primary breast augmentation. "The operation involves making an incision in the breast crease," she says, "and creating a pocket under the breast tissue either in front of or behind the pectoral muscle.

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Bleeding points are sealed, breast implant sizers utilised, and then the final breast implant selected and inserted into the pocket using a touch-free technique. The incision is closed with dissolving sutures and the wounds are covered with surgical tape."

In breast augmentation risks are reduced by making the best surgical and breast implant choices, based on good team decisions. Good team decisions start with well-informed patients and technically-prepared surgeons.

Extra questions for your surgeon when considering breast implants

- ✓ Am I a good candidate for breast augmentation?
- ✓ What are the options for breast augmentation (implants versus fat transfer)?
- ✓ What size of breast implants is recommended and why?
- ✓ What type of breast implants does the surgeon use?
- ✓ What is the life expectancy of these breast implants?
- ✓ Will it be safe to undergo mammograms with these breast implants?
- ✓ How do breast implants affect the skin with time?

Why some women choose to remove their breast implants

The beautiful breasts which helped lift our self-esteem when they were augmented are sometimes not the shape or size we want anymore. As we age, we realise these alluring feminine charms are not 100% necessary to attracting the perfect partner, or sometimes we develop health issues which have us considering our options, or we simply have different appearance objectives now.

Modern breast implants are designed to last for a minimum of ten years. Beyond this period the risk of rupture increases by one percent each year, so the older your breast implants, the greater the risk of rupture or other complications.

Dr Mackenzie says, "Sometimes women re-evaluate the size of their breast implant and choose revisional surgery which allows them smaller implants in keeping with their natural overall matured form. Many women take the opportunity when making breast implant changes or removals to combine the procedure with a breast lift or fat transfer."

"Breast Explantation (breast implant removal) is an appropriate option as long as it is what the patient wants for herself, and the surgery can be performed safely. Do your research and choose a specialist plastic surgeon that has specific interest and experience with breast surgery, including breast implant removal."



Women making choices about their own bodies and wellbeing

“Of course”, she says, “it all depends on the client! Every person is different and has different needs which our consultation helps bring out. I believe the goal when seeking plastic surgery is to have the correct surgery with the right surgeon.”

As a married mother of two Dr Mackenzie is familiar with the female psyche and physiology and wants her patients to be as informed as they possibly can be so they are empowered to make their own choices.

It would be difficult perhaps to find another female surgeon with her aesthetic and ethical values, especially combined with her extraordinary training. She was the senior microsurgery and breast reconstruction fellow, and then hand surgery BSSH fellow (British Society for the Surgery of Hand) at St Andrew’s Centre, Chelmsford, UK, a centre recognised internationally for microsurgical breast reconstruction and hand surgery. Dr Mackenzie won the prestigious microsurgery and breast reconstruction fellowship at The Royal Marsden Hospital in London. The Royal Marsden is the largest and most comprehensive cancer centre in Europe and has an international reputation for ground-breaking research and the pioneering of cutting edge cancer treatments and technologies, as well as specialising in cancer diagnosis.

Having trained with many pioneering minds in aesthetic surgery in London, she gained a world leading aesthetic surgery fellowship at top London private hospitals and acquired invaluable experience in every aspect of contemporary aesthetic surgery. In Canada Dr Mackenzie honed skills and broadened her knowledge in aesthetic breast surgery alongside Dr Elizabeth Hall-Findlay, whose contributions to breast surgery are recognised around the world as the ‘Hall-Findlay’ technique.

Raised in Poland, Dr Mackenzie earned her medical doctor’s degree (MD) from the Medical University of Warsaw. In 2003 she moved with her Kiwi husband to New Zealand and trained in plastic surgery in Auckland and Christchurch. She was awarded a PhD by the University of Otago in 2010. More titles, fellowships, and professional memberships have followed, but in the longer run, although we want someone who is highly qualified when it comes to cutting into our bodies, and in particular our beautiful breasts, we also want someone who genuinely understands, and who thrills to the opportunity to craft beauty with her skills.

As one of her clients told us, “Dr Katarzyna is lovely, and you get the whole story with her. Nothing is sugar-coated.”



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